

**Speech for
Commissioner Gwendolyn L. Harris
“A Dialogue with the Commissioner of Human Services
for the State of New Jersey”**

**Richard Stockton College of New Jersey
April 17, 2003**

Thank you for (introduction – welcome - invitation)

(If the Commissioner is present for any part of the panel discussion she may want to offer comments on that portion of the program. Otherwise, she may simply want to refer to the fact that she has just arrived and so was sorry to miss the panel discussion.)

I am energized to be here today, with such a large, welcoming and diverse audience of my peers -- fellow social workers, those in the academy who develop social workers, and “social workers to be” -- committed to trying to make a better life for individuals and families, and especially for those in our society who are the most vulnerable - the most defenseless - the most needy.

I also want to tell you how delighted I am to be at Richard Stockton College of New Jersey.

The education provided here is a key part of the foundation that supports the entire social service network across this part of the state.

The 75 or so graduates who leave Stockton each year offer employers, as well as graduate programs, a special understanding of the region and of the resources available to people who live here.

I applaud all of you for the work you do, and for the important role you play in the state and, most specifically, in South Jersey.

And I invite you to share your thoughts with me today as I talk with you about a subject that I care about passionately --the children of New Jersey.

And about the role that the social work community – including the academy that educates the members of our community-- can play in taking us to the next level in our ability to save our children.

Let me begin by stating plainly that I believe that we have a crisis on our hands.

And I need the social work community to come together to help address this crisis.

I am not speaking simply about a “crisis” at the Division of Youth and Family Services, which has been much in the news in recent months.

Even this week, papers around the state carried stories About challenges that we face in our foster care system.

No, as important as the situation at DYFS is, I am talking about a crisis that is rooted not in the “system,” but in the way in which our society – too often – chooses to ignore its children and to compartmentalize its efforts to deal with them.

The crisis that is rooted in the “busy-ness” of our personal and our professional lives.

The crisis is rooted in a lack of awareness, and knowledge, about how to recognize the signs of child abuse, and an understanding of how to take steps to help rectify it.

The crisis that grows because we turn our heads and say “I have my job to do.”

We can’t save the world. . . it’s just too much. . .let someone else do it. I have my job to do.”

As many of you surely are aware, one result of this crisis hit the front pages of newspapers around the state – and around the country - - in early January when the body of a small, 7-year-old boy was found stuffed in a closet in a basement in Newark.

The little boy was named Faheem Williams.

His death made news not just because of the sad and violent way in which he lived and died, although that was

startling and heart wrenching.

His death made news because the circumstances of his life were known to the New Jersey Division of Youth and Family Services.

DYFS – the child protection agency in this state charged with the responsibility of protecting New Jersey’s children from abuse and neglect – knew about this child.

And yet he died.

Yes. there had been 11 allegations of abuse levied against his mother at various points over the course of the past decade.

Even so, DYFS closed this case, despite the fact that there was an outstanding allegation of abuse that had not been investigated.

No matter how you slice it, this is a tragic story.

I assure you, we are taking steps to strengthen DYFS, and to “fix” the problems in the system that allowed this to happen.

We have already begun by focusing on decision making, accountability and communication and coordination.

We are reorganizing the Department of Human Services so that all of our many programs that serve children—not just DYFS—have a higher profile and, for the most part, report to a new Special Deputy Commissioner whose sole charge is protecting and serving children.

But simply transforming DYFS into a better, different agency, and the Department of Human Services into an agency that does a better job of serving children, is not going to “fix” this crisis.

This crisis is only going to be “fixed” if everyone comes together and takes a place at the table, committed to improving the well-being of children.

On the surface, Faheem’s death may not seem like the best place to start to talk about building a community of people outside government who will help improve the welfare of children in New Jersey.

Especially in South Jersey.

Down here in South Jersey, Newark may seem awfully far away.

So while the plight of a dead child, and his abused brothers, who were also found in that basement, is painful, it is also, let’s face it - - remote.

And, as I have said, DYFS could and should have done a better job.

And, that would seem to leave everyone off the hook.

Here, on this lovely campus, among the whispering pines, just a few minutes from the beaches of the Jersey shore, it is easy to understand how the plight of Faheem and his brothers might seem – remote.

But my message to you today is that the Faheem Williams was not just Newark's child.

He was New Jersey's child.

And his death is a symbol not just of what must be changed in North Jersey, but all over this state, and most particularly in the social work profession.

His death is also a perfectly appropriate place to start to talk about the problems not just at DYFS, but about problems in our larger society and the myriad of agencies that admittedly work hard every day to help children and families.

The fact is we are not doing enough! None of us!

Let me give you a little perspective about how our community of social workers can move to a higher level in its ability to address those problems.

Between 1998 and 2002, we know of 123 children who died of abuse or neglect in New Jersey.

Forty-four (44) of those children lived here, in South Jersey.

Indeed, in this county, within just a few miles of where we are sitting today, eight (8) children have died from abuse or neglect in the past five years.

Like little Sylvester, from right here in Atlantic County, who was two years old when his mother beat him to death.

Sylvester's family, like Faheem's, had been known to DYFS.

Except that in the case of Sylvester's family -- there were no outstanding allegations of abuse.

Instead, his parents had worked with DYFS, and availed themselves of the social services they were referred to by DYFS intended to help them be better parents.

The case was closed and DYFS believed it had helped this family.

One year and one month later, Sylvester's mother was charged with punching and slapping him after he vomited and would not stop crying.

And so, he died.

Sylvester's death shows that even when DYFS feels that it has done all that it can, even when families work with community agencies, children can die.

We must all look at how we do what we do.

Government can, and must, do a better job of protecting children in this state.

Surely, the death of Faheem Williams has shown us that.

But transforming DYFS could turn out to be the easy part.

The death of Sylvester shows us that it cannot be the only part.

Remember those 44 children who died of abuse and neglect in South Jersey between 1998 and 2002?

Eleven (11) of the children, like little Sylvester, belonged to families that had been involved with DYFS at one time, but whose cases had been closed for what were considered appropriate reasons, consistent with agency policy.

And so there was no contact between the agency and the families at the time the children died.

And 13 of the children who died were unknown to DYFS altogether.

Think about that.

Clearly, those 13 children belonged to troubled families.

But there had been no report, no allegation of abuse or neglect, or even a phone call to say “I think something might be wrong” that would have put those families on the DYFS radar screen.

To put it another way, almost a third of those 44 children were not only at risk but, also, they may have been totally on their own – or were they.

DYFS - for all its problems - never got the opportunity to help those children.

But those children and their families must have been known to someone.

To the county welfare agency, to a WIC program, a pediatrician, a community health clinic, a church...somebody.

Someone who could have said - - I think there is a problem here.

And raised a red flag of alarm.

DYFS can not do it alone.

When we hear the words “abuse and neglect,” it often calls to mind the image of a child like Sylvester, who died because he was beaten.

But those of you who work in agencies that serve families and children know that the picture is much more complex.

In South Jersey over the past five years, six children have died because their parents -- as filled with frustration as they were lacking in understanding and parenting skills -- literally shook them to death.

Shaken baby syndrome, we call it.

Like eleven-month-old Ziaya, from Ocean County, shaken to death by her father.

Or seventeen- month- old Victoria, also from Ocean County, shaken to death by her mother’s boyfriend.

And Tazhane, from Burlington County, who was shaken at three-months-old by her father, but who lived on in a vegetative state before she died seven years later.

Maybe these men just didn’t know how to quiet a baby. . .

We must change the way society cares for its children.

As social workers, can you think of how we should teach parents and caregivers not to shake their babies?

Do we intervene at the hospital, or in childcare centers, or health clinics?

We shouldn't wait for a referral to DYFS.

Of those 44 children who died in South Jersey, three drowned in bathtubs after they were left unattended.

Think what a difference a parent's understanding of the risks of an unsupervised toddler in the bathtub could have made.

Children like Gary, from Camden County, who died last year, one day after his first birthday, when he wandered into a bathroom where his two-year-old cousin was taking a bath unattended.

He climbed in and drowned.

Or Richard, from Ocean County, who was 15-months old when his mother left him sitting in an infant tub inside the regular bathtub, while she went to make a bottle for him.

When she returned, the tub was overturned and he was face down in the water.

We must find a way to help children at risk.

We must find a way to move to a higher level of caring for our children and teaching parents to parent.

Can we social workers explore opportunities to educate and prevent this kind of child neglect?

First, before we can even begin, we must find the children at risk.

Or, we must assume that all children are potentially at risk.

Six children died in the past five years because their mothers used cocaine or other drugs while they were pregnant.

Most of these women were simply unknown to DYFS.

But in at least two cases, the families were known to DYFS, but DYFS did not know the women were pregnant.

Like the mother of Baby Boy Damon, from Camden County, who died the same day he was born.

Three of his older siblings had already been removed from the home and placed in foster care.

DYFS did not know his mother was pregnant, again.

Pregnancy, of course, reveals itself eventually.

Someone has to be looking.

More importantly, someone has to be thinking about what they are seeing, and concerned enough to intervene.

Someone has to connect the dots— drugs. . . pregnancy -- and take note of the situation.

And someone has to place the phone call, or find some other way to intervene.

Now I would like to raise a policy question for some of you policy wonks to consider.

If the child protection agency is involved with a family due to abuse or neglect, severe abuse is substantiated and the parents cannot be rehabilitated, we remove the child, seek to terminate parental rights and have the child adopted.

We close the case with the parents.

The parents have another child.

Should it be public policy to alert all hospitals and birthing places to notify the child protection agency, because this newborn is at risk?

Think about it.

I would like to believe that we can prevent all child deaths.

Even the death of Baby Boy Waters, from Cumberland County, whose 15-year-old mother gave birth to him in a bathroom.

She said she did not know she was pregnant.

Her grandmother said she, also, did not know the teenager was pregnant.

The mother was eventually charged with murder, since the baby was not born dead, as she first maintained, but was shown to have been born alive.

What should be the social work response if she becomes pregnant again? How would you intervene in a case like that?

The real, long-term way to “fix” this crisis is not just to catch these cases.

We must educate and prevent.

We must stop the ignorance that creates adults who don’t know any other way to parent than to abuse or neglect their own children.

DYFS cannot accomplish this alone.

To make this type of fundamental change in society, everyone must play a part.

It cannot happen overnight.

People will need to be pushed, prodded and pulled to participate in this type of change.

It is a change that I have referred to as a movement for children, a community partnership to protect our children.

If this movement is going to take hold, I believe that it will be because we, as social workers, have helped to make it happen.

I am calling on all segments of society to help make this change, from the healthcare worker to the educational community to neighbors and babysitters and family members.

Now, I call on you the social work community.

Let us talk about how we can change the way we do things.

About how we can move to that higher level of caring and effectively intervening for our children, and protecting them from neglect and abuse.

As social workers, we must understand the factors – such as substance abuse and domestic violence – that contribute to child maltreatment, as well as child protection.

These issues are all too common to all types of families that have problems.

And they are subjects that, as a society, we have never grappled with very well.

But those of us who belong to the helping professions should have, as a matter of course, more than a passing knowledge of the dynamics of these critical issues.

Yet the dynamics of substance abuse or domestic violence are not generally required in the core content curricula that a student must master in order to become a clinical social worker or a psychologist.

Nor is a deep understanding of these issues required by state licensing authorities.

Which means that when the child protection agency refers a family to a clinician to be evaluated or for therapy, unless that clinician has taken special effort to expand their competencies in these areas, they may miss or inappropriately respond to the critical issues facing the family.

We have in our power the ability to address that.

Indeed, there are people in this room who, as members of the academy, could walk out the door today and start developing curricula to educate students immediately about these critical subjects.

Social workers who interact with children and families should be knowledgeable about these issues, regardless of where they work – whether it is in a school, a hospital, a maternal health program, a clinic, a county welfare office, or a child care program.

And then, we, as social workers, must look beyond the presenting problem to address the whole parent, the whole child and the whole family, no matter what setting we are working in.

We must be resourceful and use every opportunity to prepare parents to parent appropriately.

How do we, for example, prevent a parent from shaking his baby to death?

Do we add it to that checklist of things we tell new parents when they leave the hospital:

here is how you diaper a baby –

here is how you prepare the bottle with the formula –

and oh yes, please don't forget, do not shake the baby.

It may sound a little simplistic presented that way, but I assure you - I am very serious.

How do we stop this crisis?

What about the whole complicated issue of how to be a good parent?

Watch the baby in the bathtub.

Don't leave your medications out where a child can swallow them.

Jessica, from Atlantic County, was four when she swallowed her grandfather's methadone and died.

This child belonged to a family that had been referred to DYFS for reports of abuse.

The reports could not be substantiated, and the case was closed.

Nine months later she died, not because of physical abuse but because of neglect.

There are parenting programs.

But I am talking about the family that passes through the clinic, or the child care center – but who has not risen to the level of concern that would prompt a call to DYFS and a referral to a parenting program.

How do we teach parents who to leave their child with if they have to run an errand?

Some parents really, truly, do not understand that a child cannot be left with just anyone.

Six of the children who died in South Jersey were abused by a parent's boy friend or, in one case, girlfriend in who's care the child had been left.

The question we have to ask ourselves is how can we, as social workers, become more aware, more cognizant of these issues?

And then how can we, as social workers, take that knowledge and find a way to make a difference?

How do we push the edge of the envelope so that we can really stop child abuse and neglect, and help put a child on a course to stable, healthy adulthood?

How can we as social workers prevent child abuse?

Or improve a child's well-being?

And stop the crisis of neglect and abuse that is perpetuated through bad and dangerous parenting.

Our social work community needs to step up and be counted in this effort.

Already, in the first four months of 2003, ten children have died of abuse or neglect in New Jersey.

There is much work to do.

In closing, I want to share with you an old African proverb that I have spoken of before because it speaks to the heart of what I am talking about.

“The ruin of a nation begins in the homes of its people.”

I challenge you, as I have challenged others, to think about what this means for our state, New Jersey: The ruin of a nation begins in the homes of its people.

The more I think about this proverb, the clearer it becomes to me.

The ruin of a nation... the demise of a people...begins at home.

I challenge you to think about what this means for those of us who belong to the community of social workers.

We need to value our children.

We need to protect our children.

We need to put our children first because they are the future of our state, our society, our nation.

They are us.

We are tragically failing some of our children and this must change.

The students who are being educated and trained here today are the ones who will – who must -- go on to bring about that change.

And it is the academy that must prepare them for that change.

As social workers, we have a special place in the community of people who love children.

We are committed to improving lives.

And, we are trained to do it.

Now, it is time to reflect on that training, and to think about innovative ways of making it even more effective in the work that social work students will be called on to do.

We, as social workers, have to find a way to move to that next level.

We can't just save our own child; we have to save the child across the state, too, because their worlds are inextricably intertwined.

And we may be their last or only hope.

Thank you.